

MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES STATE PUBLIC HEALTH LABORATORY BREATH ALCOHOL PROGRAM **DATAMASTER MAINTENANCE REPORT**

RECEIVED 3/9/14-CD

REVIEWED

				Carol Day at 4:05 pm, Mar 31, 2	
Complete this report at the time of the re Complete this report whenever the instru Retain the original and send a copy with	iment is serviced or repair	ed and whenever it is	placed into service).	
DATAMASTER SN NAME OF AGEN	DATAMASTER SN NAME OF AGENCY				
LOCATION OF INSTRUMENT (STREET AND CITY)			03/01/2014 Time of Inspection		
301 Jefferson Street. Washington, MO CHECKLIST: Place a mark in the box by each item if found to be satisfactory or		efectory or if operating	5:30 pm	nito (Milita in channed vatur	
where determined.) Unmarked items mus	st be corrected before using	ig Instrument.	y within established lif	ilits. (write in observed value	
✓ DIAGNOSTIC CHECK (PRINTOUT ATTACHED) DATE AND TIME (from printout) 5:31pm					
☑ COMPUTER		DETECTOR			
PROGRAM		☑ FILTERS			
HEATERS SAMPLE CHAMBER	49.0 <u></u> °C	QUARTZ STAI	NDARD		
☑ FLOW DETECTOR		☑ CALIBRATION			
PUMP HIGH SPEED		PRINTER			
☑ INDICATOR LIGHTS					
SIMULATOR SOLUTION SUPPLIER	Repco	LOT # <u>1</u>	3002 EXF	P. DATE 06/19/2015	
SIMULATOR TEMP (34°C ± 0.2°C) _	34.0 °C S	IMULATOR SN	SD2232 EXF	P. DATE 01/08/2015	
CALIBRATION CHECK - (ONLY ONE	STANDARD IS TO BE U	SED PER MAINTEN	ANCE REPORT)	**************************************	
Run three tests using a standard soluless. Mark the box corresponding to the	e standard solution being	used. (PRINTOUT AT	TACHED)	ust have a spread of .005 c	
0.100% STANDARD - MUST REAL 0.080% STANDARD - MUST REAL 0.040% STANDARD - MUST REAL	D BETWEEN 0.076% AND	0.084% INCLUSIVE			
EST1 ► .098	TEST 2 ★ .095		TEST 3 ☞ ,096		
PERFORM R.F.I. TEST (PRINTOUT A	TTACHED)	······································			
NDICATE THE NUMBER OF BREATH TO DO NOT INCLUDE SELF-ADMINISTERE	ESTS IN THE FOLLOWIN	G RANGES SINCE 1	THE LAST MAINTEN	ANCE REPORT:	
EFUSALS 0 (004) 0	(.0509) 0	(.1014) 0	(.1519) 1	OVER .19 0	
STANY NEW PARTS AND DESCRIBE ANY ALTERATION OF SE OTHER SIDE IF NECESSARY).	R MODIFICATION THAT WAS MADE T	O RESTORE THE INSTRUMEN	 IT TO OPERATE SATISFACTOR	RILY AND WITHIN ESTABLISHED LIMITS	
ISPECTING OFFICER	Shorter within the course.	PRINT FULL NAM	E	Facility and the effect of	
30 SEKAN DE		Joseph E.	Joseph E. Kapustka		
PE II PERMIT NUMBERÆXPIRATION DATE 30064 04/23/	2015	(636) 390-			
2	reath Alcohol Program, M 875 James Blvd. oplar Bluff, MO 63901	O Department of Hea	ith and Senior Service	es, Southeast District Office	

CERTIFICATE OF ANALYSIS

MANUFACTURERAND SUPPLIER: RepCo Marketing, Inc
LOT NUMBER: 13002
EXPIRATION DATE: June 19, 2015 at 11:59 p.m.

RepCo Marketing, Inc. certifies the following:

The alcohol and distilled water used in the solution were found to be free of any interferring substance.

This solution will produce a vapor alcohol value of _100_ +/-3% gms/210L; Breath when heated to 34 Degrees Celsius +/-0.2 Degrees Celsius in a simulator (95% Confidence).

The date of manufacture for this lot number is <u>June 20, 2013</u>

The expiration date for this lot number is <u>June 19, 2015</u> at 11:59 p.m.

This document is a true representation of the original Certificate of Analysis.

Cecil B. Garner, President RepCo Marketing, Inc.

Form RM 02

Face This Side Down - This Edge In First

BAC DataMaster Evidence Ticket

STATE OF MISSOURI BAC DATAMASTER SERIAL NUMBER 203050 03/01/14

TESTING OFFICER:
KAPUSTKA/JOSEPH/E
OFFICER I.D.: 261
PERMIT NUMBER: 230064
EXPIRATION DATE: 04/23/15
MISCELLANEOUS-BATA;

--- SUPERVISOR MODE ---

DWIII W	EXTERNAL STANDARD BLANK TEST EXTERNAL STANDARD EXTERNAL STANDARD EXTERNAL STANDARD BLANK TEST	INTERNAL STANDARD
		enerinien enerinien
	17:36 17:36 17:38 17:38 17:38	171.05

Operator Signature St. SEKA

Face This Side Down — This Edge In First

Face This Side Down - This Edge In First BAC DataMaster

Evidence Ticket

BAC DataMaster Evidence Ticket

BAC DATAMASTER SERIAL NUMBER 203850 STATE OF MISSOURI **200/01/14**

BAC DATAMASTER SERIAL NUMBER 203050

900/001/14 7.07

STATE OF MISSOURI

SKAY.

COMPOTER

--- DIRENDETIC CHECK

\$ \$ \$ \$

PROBRAM (84-87-8889):

HRREST TIME: 17:00 SUBJECT NAME.

DOB: 18/18/99

STATE/D,L.: MO/11111111

SERVICE CHICKERS

KAPUSTKALIOSEPHAM OFFICER 1, D. : 861

TENTING CHILCHS

KEPUSTKE/JOSEPH/E

PERMIT NUMBER: 238864 OFFICER 1.D. # 261

MYPIRETION DRYE: 04/00/10

MINCELLANGOUS MATA:

--- BREATH ANALYSIS ---

, GBBB INTERNAL STANDARD ARBIDO INTERFERENCE

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FLOW DETECTOR:

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SAMPLE CHEMBER:

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DETECTOR:

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CURRTZ STANDARDS

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PATATER TEST

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2208-02

Operator Signature_

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Operator Signature.